FORM D

1297354

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

7	OMB APPROVAL				
	OMB Number:	3235-0076			
i	Expires: Ap	ril 30, 2008			

SEC USE ONLY

DATE RECEIVED

Estimated average burden

hours per response:

Prefix

16.00

Serial

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)	
Goldman Sachs Hedge Fund Partners Plus, LLC: Units of Limited Liability Company In	terests
Timing Grader (Greek Bonices) and apply).	□ Section 4(6) ↑ 1/□ ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	APR 16 ZUU8
Enter the information requested about the issuer	APR 16 2008
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	Washington, DC
Goldman Sachs Hedge Fund Partners Plus, LLC	Telephone Number (including Area Code)
Address of Executive Offices (Number and Street, City, State, Zip Code)	(212) 902-1000
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, NY 10004	(212) 902-1000
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone No. (1 1 1 1 2 2 2 2 Code)
(if different from Executive Offices)	
Brief Description of Business PROCESSE	
· · · · · · · · · · · · · · · · · · ·	f (DDI) Jerga inu eark anns ark figh a' caa inu ear
To operate as a private investment fund. APR 242008	
Type of Business Organization THOMSON DEIT	——————————————————————————————————————
Type of Business Organization corporation limited partnership, THOMSON REUT	EK3 ☑ other (please specify):
☐ business trust ☐ limited partnership, to be formed	Limited Liability Company
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 5 0 4	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia	tion for
State: CN for Canada; FN for other foreign ju	risdiction) D E
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation I	O or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering.	A notice is deemed filed with the U.S. Securities and
Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below of	or, if received at that address after the date on which it is
due, on the date it was mailed by United States registered or certified mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manu	ally signed. Any copies not manually signed must be

Filing Fee: There is no federal filing fee.

photocopies of the manually signed copy or bear typed or printed signatures.

State:

with the SEC.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following:									
 Each promoter of the issuer, if the issuer has been organized within the past five years; 									
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
* Each executive officer and director of corporate issuers and of corporate general and managing partners of	partnership issuers; and								
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑	General and/or Managing Partner								
Full Name (Last name first, if individual)									
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, NY 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ *of the Issuer's Managing Member	General and/or Managing Partner								
Full Name (Last name first, if individual)	,								
Asali, Omar									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004	<u> </u>								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ *of the Issuer's Managing Member	General and/or Managing Partner								
Full Name (Last name first, if individual)									
Barbetta, Jennifer									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
• • • • • • • • • • • • • • • • • • • •	General and/or Managing Partner								
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer ☑ Director* □									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer ☑ Director* □ *of the Issuer's Managing Member Full Name (Last name first, if individual) Ort, Peter									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer ☑ Director* □ *of the Issuer's Managing Member Full Name (Last name first, if individual) Ort, Peter Business or Residence Address (Number and Street, City, State, Zip Code)									
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Co Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 Check Box(es) that Apply:	Managing Partner General and/or Managing Partner General and/or								
Check Box(es) that Apply:	Managing Partner General and/or Managing Partner General and/or								

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(Number and Street, City, State, Zip Code)

Business or Residence Address

				B. INI	FORMAT	ION ABO	UT OFFI	ERING			•	
						-					Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Ø			
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?								\$2,500,000*				
*The Managing Member of the Issuer, in its sole discretion, may accept subscriptions in lesser amounts. 3. Does the offering permit joint ownership of a single unit?								Yes ☑	No			
4. Enter t									ctly, any			
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.									offering.			
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such												
		ame of the you may so						d are associ	ated person	s or such		
	<u> </u>	first, if ind								.		
T un rame	(Lust nume	, mon, m ma										
	Sachs & C			0 0	G 77	<u> </u>						
Business o	r Residence	e Address (N	Number and	Street, City	y, State, Zip	Code)						
85 Broad	Street, Nev	v York, Ne	w York 100	04								
Name of A	ssociated E	Broker or De	ealer									
States in W	hich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Check "A	All States" o	or check ind	lividual Stat	es)						• • • • • • • • • • • • • • • • • • • •		I States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	e Address (N	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	roker or De	ealer								·- - -	
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
							,				🗆 AI	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[Ri]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)			_			
Name of A	ssociated E	Broker or De	ealer					···				
States in V	/high Darso	n Lietad Ha	e Solicited	or Intende t	o Solicit Pu	rchasers	.					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								All States				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\D\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		Ar	nount Already Sold
	Debt	\$	0	\$		0
	Equity (Shares)	\$	0	\$		0
	□ Common □ Preferred					
	Convertible Securities (including warrants)	\$	0	\$		0
	Partnership Interests	\$_	0	\$		0
	Other (Specify: Units of Limited Liability Company Interests)			\$		361,230,522
	Total			\$		361,230,522
	Answer also in Appendix, Column 3, if filing under ULOE.	_		•		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number		Đ	Aggregate ollar Amount
			Investors			of Purchases
	Accredited Investors	_	255	\$		361,230,522
	Non-accredited Investors	_	0	\$		0
	Total (for filings under Rule 504 only)	_	N/A	\$		N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of		D	ollar Amount
	Type of offering		Security			Sold
	Rule 505	_	N/A	\$		N/A
	Regulation A	_	N/A	\$		N/A
	Rule 504		N/A	\$		N/A
	Total	_	N/A	\$		N/A
tl tl	.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs			\$		0
	Legal Fces		函	\$		299,102
	Accounting Fees			\$		0
	Engineering Fees			\$		0
	Sales Commissions (specify finders' fees separately)			\$		0
	Other Expenses (identify)			\$		0
	Total			\$		299,102

	C. OFFERING PRICE, N	IUMBER OF INVESTORS, EX	PENS	ES A	ND USE OF P	ROCE	EDS	
	 b. Enter the difference between the aggreg Question 1 and total expenses furnished difference is the "adjusted gross proceeds to 	in response to Part C - Question 4	a. Th	is		\$_	,	360,931,420
5.	Indicate below the amount of the adjusted at to be used for each of the purposes shown, furnish an estimate and check the box to payments listed must equal the adjusted gro to Part C - Question 4.b. above.	If the amount for any purpose is no the left of the estimate. The total	knows I of th	n, ie				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		. 🗆	\$_	0		\$	0
	Purchase of real estate		. 🗆	\$_	0		\$_	0
	Purchase, rental or leasing and installation of	of machinery and equipment	. 🗆	\$_	0		\$	0
	Construction or leasing of plant buildings as	nd facilities	. 🗆	\$_	0		\$_	0
	Acquisition of other businesses (including this offering that may be used in exchan another issuer pursuant to a merger)	ge for the assets or securities of	· 🗆	\$	0		\$	0
	Repayment of indebtedness	(41-41-41-41-41-41-41-41-41-41-41-41-41-4		s	0		s _	0
	Working capital			\$	0		\$	0
	Other (specify): Investment Capital	,		\$_	0		s _	360,931,420
	Column Totals		. 🗆	\$_	0	- 2	\$	360,931,420
	Total Payments Listed (column totals added	360,931,420						
•		D. FEDERAL SIGNATI	JRE					
fe	The issuer has duly caused this notice to be oblowing signature constitutes an undertaking f its staff, the information furnished by the iss	by the issuer to furnish to the U.S.	Securit:	ies an	d Exchange Comr	nission,	upon	r Rule 505, the written request
Iss	uer (Print or Type)	Signature			Date			
Go LL	ldman Sachs Hedge Fund Partners Plus,	Lat On			April 15, 2008			
	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Ka	thryn Pruess	Vice President of the Issuer's Mar	aging	Mem	ber			

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).